

**MINUTES OF ROTHERHAM CLINICAL COMMISSIONING GROUP
 GOVERNING BODY MEETING**

Wednesday 4 October 2017 AT 1.00pm

Elm Room G.04 at Oak House, Moorhead Way, Bramley, Rotherham S66 1YY

Present:

Dr R Cullen, GP, Chair SCE RCCG
 Mr I Atkinson, Deputy Chief Officer, RCCG
 Mrs W Allott, Chief Finance Officer, RCCG
 Mrs S Cassin, Chief Nurse, RCCG
 Mrs K Henderson, Lay Member RCCG
 Dr G Avery, GPMC Representative, RCCG
 Dr S MacKeown, GPMC Representative, RCCG
 Dr R Carlisle, Lay Member, RCCG
 Dr D Clitherow, Independent GP, RCCG
 Dr J Page GP Lead, Finance and Governance, RCCG

Participating Observers:

Mr G Radcliffe, Public Health Consultant RMBC

In Attendance:

Mrs R Nutbrown, Board Secretary, RCCG
 Mr G Laidlaw, Communications Manager, RCCG
 Ms A Hague, Corporate Services Manager RCCG
 Ms D McGarvey, PA, RCCG
 Dr A Barmade, GP Diabetes lead, RCCG
 Mr A Clayton, Head of IT, RCCG

Observers:

Laura Meredith from Sanofi Pharmaceutical Company, Guildford

Apologies

Mr J Barber, Lay Member/Chair of Audit Committee, RCCG, Cllr D Roche, RMBC

No.	Item	Action:
01/17	Declarations of Pecuniary or Non-Pecuniary and Conflicts of Interests	
	It was acknowledged that, as Primary Care Providers in Rotherham, Drs Cullen, MacKeown, Page and Clitherow had an (indirect) interest in most items.	
02/17	Patient & Public Questions	
	There were no patient and public questions.	

No.	Item	Action:
03/17	<p>Draft Minutes of the Governing Body meeting held 6th September 2017</p> <p>The Minutes from the Governing Body held on 6th September 2017 were approved as a true record of proceedings with the following amendment:</p> <p>Point 08/17 Mrs Henderson requested that feedback from the engagement work is to be fed back to the Delayed Transfer of Care work and not the CCG.</p> <p>Mr Atkinson confirmed that this action has been carried out.</p>	
04/17	<p>Governing Body Actions Log</p> <p>Members reviewed the log and noted progress. The log will be updated to reflect discussions and will be circulated with the minutes.</p>	
05/17	<p>Chief Officers Report</p> <p>Mr Edwards presented the Chief Officer report and highlighted the following:</p> <p><u>Royal Opening at the Urgent and Emergency Care Centre</u> The Royal opening at the Urgent and Emergency Care Centre took place on the 2nd of October and was carried out by the Duke of Kent, Dr Richard Cullen represented Rotherham CCG.</p> <p><u>HSJ Awards Shortlist</u> Social Prescribing – Mental Health in the ‘Supported Self Care’ category has been shortlisted. The entry will be presented by CCG with Rotherham Doncaster and South Humber NHS foundation Trust and Voluntary Action Rotherham on 12th October. The winner will be announced in London on the 22nd November</p> <p><u>Macmillan Living with and Beyond Cancer programme</u> Mr Edwards reported that South Yorkshire, Bassetlaw and North Derbyshire Cancer Alliance Board provided a progress update on the Macmillan Living with and Beyond Cancer.</p> <p><u>Communications Update</u></p>	

- Winter communication will start mid-October to coincide with national Stay Well this Winter Campaign
- Local media from Rotherham were invited to the Urgent and Emergency Care Centre opening to cover the visit by the Duke of Kent.
- The Health and Social Care Integrated Place Plan was one of five ‘game changers’ for Rotherham that were promoted by the

No.	Item	Action:
	<p>Rotherham Together Partnership at the Rotherham Show in September. Other game changers include the town centre masterplan, building stronger communities, Wentworth Woodhouse, Gulliver's Valley and the new University Centre, Rotherham.</p>	
	<p>The Governing Body noted the contents of the report.</p>	
06/17	<p><u>Rotherham Health Care Record and Models of Consent</u></p>	
	<p>Mr Clayton presented the paper and informed Governing Body that the paper was intended to give members an update on the Information Sharing Agreement for Rotherham Health Record.</p>	
	<p>Mr Clayton gave an overview of the Rotherham Health Care Record to date. Mr Clayton went to say that work is well under way to Link Social Care data to Rotherham Health Care Record and Rotherham, Doncaster and South Humber (RDaSH) data will be linked next year.</p>	
	<p>Mr Clayton also said there are already existing information agreements in place but further work is needed to agree a new information sharing agreement.</p>	
	<p>Mr Clayton said there have been detailed discussions around the consent model. Discussions focussed on implicit consent locally at the present time.</p>	
	<p>Mr Clayton also said the clinical engagement had been sought into the implied consent model. Information Governance Leads have also looked in to the consent model in depth. We have a good legal basis for moving forward.</p>	
	<p>Mr Clayton informed Governing Body that a Privacy Impact Assessment (PIA) has been conducted in depth</p>	
	<p>Mr Clayton gave an outline of the next steps and informed Governing body that the work is expected to be completed for January 2018</p>	
	<p>Dr Carlisle said that it was important that we point out the risks and regular audits are conducted to ensure who will ensure appropriate access to records.</p>	
	<p>Mr Clayton informed Governing Body that there will be Privacy Officers in each organisation who will review regular audits and transaction logs.</p>	
	<p>Dr Avery Asked when the Health Care Record would go live.</p>	
	<p>Mr Clayton informed Dr Avery that it was live now and if we get the Information Sharing Agreement signed by the beginning of November then the information will begin to flow.</p>	

No.	Item	Action:
07/17	<p>Mr Edwards informed Governing Body that the Sharing Agreements will come back to Governing Body once they have been signed</p> <p>The Governing Body noted the update.</p> <p><u>Diabetes Progress Update</u></p> <p>Dr Barmade presented the paper and informed Governing Body that the new Diabetes Model commenced on the 1st April 2017.</p> <p>Dr Barmade informed members that planning for the introduction of the new model began in September 2015 to look at ways to improve Diabetes care across Rotherham. This was in response to national reports indicating that Rotherham was an outlier for Diabetes care both in term of cost and outcomes. The annual cost of diabetes in Rotherham is around £10.5 million pounds (excluding associated complications) and this figure is projected to increase to £12 million over the next 5 years.</p> <p>Dr Barmade went on to say that the model is based on the Portsmouth “Super 6” model. Under this model 95% of patients who have a diagnosis of diabetes will be cared for in the Community by General Practitioners, Practice Nurses and Community Diabetes Specialist Nurses (DSN) and with significant emphasis placed on self-care by appropriately educated patients.</p> <p>Dr Barmade said that GPs and Practice staff will be supported in managing the vast majority of patients with Diabetes in the community, with education and advice provided by Secondary Care clinicians via virtual clinics and MDTs and by the DSN service. There is currently variation within practices in respect of Diabetes treatment and care. Dr Barmade gave an outline of the new model.</p> <p>Mrs Henderson said that it was good to hear about the progress made.</p> <p>Dr Clitherow, asked how are you going to undertake evaluation? Dr Barmade informed Governing Body that the dashboard will be monitored and GPs will be asked to keep monitoring feedback.</p> <p>The Governing Body noted the update.</p>	
08/17	<p>PERFORMANCE REPORTS</p> <p>a) <u>Finance & Contacting Performance Report:</u></p> <p>Mrs Allott presented the report and informed the Governing Body: NHS Rotherham CCG have been notified of a revenue allocation of £398.9m for operational purposes for month 5.</p> <p>The CCG during the month received one resource allocation totalling £0.016m, this related to a previous adjustment for IR changes that had been taken off of the CCG earlier on in the financial year.</p>	

No.**Item****Action:**

	Apr-17	May-17	Jun-17	Jul-17	Aug-17
	£'m	£'m	£'m	£'m	£'m
Monthly Cash drawing	31.0	28.5	33.0	29.0	31.5
Ledger Cash Balance	0.4	0.1	2.9	5.1	6.2
Cash Balance as a %	1.29%	0.35%	8.79%	17.59%	19.68%

Mrs Allott confirmed that there are pressures in the system.

Rotherham CCG, have signed up to the Better Payment Practice Code which all valid invoice are to be paid by the due date or with 30 days.

Mrs Allott provided an Operating Cost Statement in her report with a breakdown of spend, prior, to date and forecast outturn.

Governing Body noted the report.

b) QIPP Performance Report

Mrs Allott presented the reported and advised Governing Body that the report is here for the second time in the new format. The report continues with the same narrative and previously reported.

The Governing Body noted the report.

c) Delivery Dashboards

Mr Atkinson presented the report and highlighted:

The new Urgent and Emergency Care Centre has been live since 6th July. The Walk in Centre also closed on this date. Urgent and Emergency Care is now a single streaming service at TRFT. The position remains challenged with performance in September to date(as at 24th September) at 81.5%. This remains an underperformance against the STF trajectory of 89.8%

Bedding in of the new model of care within the department and workforce challenges continue to present as the main factors in delivering sustainable performance, with additional challenges arising during the weekend period. TRFT continue to receive support from the National A&E improvement team. Three new A&E consultants are due to commence in the department throughout October and November and will significantly improve the current A&E Dr workforce capacity. It is expected this additional capacity will improve currant performance.

No.	Item	Action:
	<p>GP streaming has been implemented within the department which has had a positive impact, streaming on average 30-35% patient routinely. The CCG continue to work closely with partners through the A&E delivery Board to realise improvement. Local comparison to other Trust's in South Yorkshire can be seen below.</p> <p>A discussion took place on A&E performance. Mr Edwards said the A&E Winter Plan needs to be presented to Governing Body to give assurance.</p> <p>The national standard is 3.5% of total occupied bed days taken up by delayed transfer of care. Rotherham Foundation Trust is currently above that standard at 4.5%(July) . for the previous two months performance has been 5.7%(Jun-17) and 6.1% (May-17). TRFT and RMBC commissioned an external review of DTOC pathways via the local Government Association, the findings of this work have been reported to A&E delivery board with proposed action for improvement. Partners have agreed an improvement action plan and agreed specific identified finding through the improved Better Care Fund, to support the plan delivery.</p> <p>Yorkshire Ambulance Service are currently participating in an NHS England-led Ambulance Response Programme (ARP), which went live from the 21st April 2016. The pilot ran for 3 months initially and has subsequently been extended. This programme resulted in a change to call category classifications, which has been monitored on this report.</p> <p>The national target for patients accessing IAPT services is 75% within 6 weeks and 95% within 18 weeks. The 6 week wait position for Rotherham CCG as at w/c 25th September 2017 was 96.9%. this is above the standard of 75%. September performance was 97.3%. the IAPT position has seen steady improvement over the last few months, and is now performing well. Self-referral into the service is now established and contributing to this improvement.</p> <p>Governing Body noted the report</p> <p><u>d)Q1 Commissioning Performance Plan</u></p> <p>Mr Atkinson presented the report and informed the Governing Body that the current Commissioning Plan was produced two years ago, the landscape has changed significantly over this time and significant progress has been made on the CCGs priorities. As a result work has begun to refresh the Commissioning Plan.</p> <p>Mr Atkinson went on to say that the Performance Report has therefore been revised for 2017/18 to cover remaining actions in the current Plan and, where possible, to cover content that will be in the refreshed Commissioning Plan which is due for completion February/March 2018.</p>	

No.	Item	Action:
	Mr Atkinson informed Governing Body that the performance framework will be reported 4 times a year and will be received at Governing Body in October, December, February and a final year-end report in May.	
	Mrs Allott agreed to provide a report on the Medicine Management prescribing QIPP for the next meeting	WA
	The Governing Body noted the report.	
09/17	<p>Quality & Patient Engagement</p> <p>a) <u>Patient Safety & Quality Assurance Report</u></p> <p>Mrs Cassin presented the report and highlighted the following:</p> <p>Collaborative working around E Coli continues, Rotherham CCG have produced an action plan for reducing numbers and this has been shared with NHS England (NHSE). The number of cases remains below plan and also reflects a reduction on the previous year's figures.</p> <p>Mrs Cassin confirmed that the Safeguarding Report for Domestic Abuse will go to the Audit & Quality Assurance Committee and Strategic Clinical Executive meetings before being brought to Governing Body and confirmed that on-going training is being carried out.</p> <p>The Governing Body noted the report.</p> <p>b) <u>Patient Engagement & Experience Report</u></p> <ul style="list-style-type: none"> • Mrs Cassin presented the report and highlighted: • There are no issues from the feedback received so far re: the Urgent and Emergency Care Centre, any trends found will be reported in any future experience reports. <p>The Governing Body noted the report.</p>	SC
10/17	<p>Corporate Assurance Report</p> <p>Ms Nutbrown presented the following policies for reviewing by Governing Body members</p> <ul style="list-style-type: none"> • <u>HR Flexible Working Policy</u> • <u>Risk Management System</u> <p>Consist of the Governing Body Assurance Framework, Risk Register and Issue Log the review delayed by a month which could effect, the assurance statement at the end of the year</p> <ul style="list-style-type: none"> • <u>Corporate Assurance Report</u> <p>The Corporate Assurance Report was received by internal Audit in April. Ms Nutbrown confirmed to Governing Body</p>	

No.	Item	Action:
	<p>members that this paper does not go to Operational Executives meeting.</p> <p><u>Equality & Diversity</u></p> <p>Ms Nutbrown advised Governing Body that the report will be brought to the Governing Body meeting in November.</p> <p>Governing Body approved the policies.</p>	RN
11/17	<p>MINUTES FROM OTHER MEEITNGS</p> <p>Minutes of the Engagement & Communications Committee September 2017</p> <p>Received and noted for information</p> <p>Minutes of the GP Members Committee no meeting held in August 2017</p> <p>Noted there was no meeting in August 2017</p> <p>Minutes of the A&E Delivery Board August 2017</p> <p>Received and noted for information</p> <p>Minutes of the STP Collaborative Board meeting held July 2017.</p> <p>Received and noted for information</p> <p>Mr Edwards confirmed that the title of this meeting has been changed to South Yorkshire and Bassetlaw Accountable Care System (SYB ACS)</p>	RN
12/17	<p>Future Agenda Items</p> <p>None</p>	
13/17	<p>Glossary</p> <p>Standing agenda item. No new updates to note.</p>	
14/17	<p>Urgent Other Business</p> <p>There was no other business discussed</p>	
15/17	<p>Issues to alert the Governing Body (or other Committees of the Governing Body) about plus alterations to risk register</p>	

No.	Item	Action:
	No issues for escalation.	
16/17	Exclusion of the Public	
	In line with Standing Orders, the Governing Body approved the following resolution: <i>“That representatives of the press and other members of the public be excluded from the meeting, having regard to the confidential nature of the business to be transacted - publicity on which would be prejudicial to the public interest.”</i> <i>[Section 1(2) Public Bodies (Admission to Meetings) Act 1960 refers].</i>	
17/17	Date, Time and Venue of Next Meeting	
	The next Rotherham Clinical Commissioning Group’s Governing Body Meeting to be held in public is scheduled to commence at 1.00pm on Wednesday 1 November 2017 in Elm Room, at Oak House, Moorhead Way, Rotherham S66 1YY.	